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Thank you, Senator Slossberg, Senator Boucher, Representative Fleischmann and members of the Education Committee for the opportunity to submit testimony on behalf of the Association of School Nurses of Connecticut (ASNC) in opposition to:

**HB 5452**

***AN ACT CONCERNING THE RECOMMENDATIONS OF THE TASK FORCE ON LIFE-THREATENING FOOD ALLERGIES IN SCHOOLS***

ASNC opposes Sections 3-6 for the same reasons as opposition to:

***HB 5341 An Act Providing Immunity From Liability For School Bus Drivers Who May Administer Medication To A Student.***

The requirements below echo the language of HB 5341 which ASNC previously articulated in detail reasons for opposition. This proposed bill causes an undue burden on school districts and transportation companies resulting in an unfunded mandate. In addition, the reference in Section 5 (a) )1) to “[school bus personnel, as defined in section 3 of this act](#), may administer, subject to the provisions of subdivision (2) of this subsection, medicinal preparations, including such **controlled drugs**” should be removed. Administration of controlled drugs by bus drivers is unnecessary and inappropriate.

A school bus safety protocol is already in place in the district in which I serve. The protocol includes providing bus personnel a list of students, not limited to food allergies. The list includes other potentially urgent health conditions. “Section 3 (1) a requirement that each school bus contain a list of the names of any student with a life-threatening food allergy who regularly rides such school bus and that such list is updated annually” is in place. Our lists are not updated annually; it is updated as needed whenever student health conditions change or occur. The existence of our safety protocol highlights the value of professional school nurses capable of planning for students and resurrects the need to revise the regulations from 1982 (Section 10-212-1 through 7- School Nurses and Nurse Practitioners) for school nurses in Connecticut. Portions of language in Section 3, with revisions, may work in addressing concerns for all children on the bus.

Training and supervision is a complex process. The school nurse must determine delegation based on:

**Five Rights of Delegation**

**Right Task:** One that is delegable for a specific patient.

**Right Circumstances:** Appropriate patient setting, available resources and other relevant factors considered.

**Right Person:** Right person is delegating the right task to the right person to be performed on the right person.

**Right Direction/Communication:** Clear, concise description of the task, including its objective, limits and expectations.

**Right Supervision/Evaluation:** Appropriate monitoring, evaluation, intervention, as needed, and feedback.

In order for training and delegation to occur, it is necessary for the school nurse to assess the ability of the person. The school nurse is unable to train anyone deemed incapable of performing the task appropriately and safely. In order for training and delegation to occur, the person being trained must be willing to assume responsibility. Regardless of the employing body, school nurses may not take on responsibility for training and supervision for bus drivers.

Training and subsequent supervisory requirements cause an unfunded mandate for transportation companies and school districts. Training for medication administration by bus drivers, at a minimum, will take 2 hours with an additional 3 hours for CPR and First Aid. In order for training to occur, additional funding for time spent in training will have to be compensated.

ASNC realizes the concerns of all parents for their children in school and in transportation; however the requirements of HB 5452 and HB 5341 must be made with a clear understanding of what is involved before any legislation is finalized.

ASNC is willing to enter into the development of a plan to address the concerns related to health issues during bus transportation to and from school and during school sponsored trips. ASNC is unable to support this bill as written. ASNC urges you to oppose this bill for reasons above and those narrated in Testimony submitted for HB 5341.

Respectfully submitted,  
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Sec. 3. (NEW) (*Effective July 1, 2018*) Not later than July 1, 2019, the Departments of Education and Public Health shall jointly develop a model school bus safety protocol designed to assist school bus personnel in the event that a student is experiencing a life-threatening food allergy emergency on a school bus. **Such protocol may include, but need not be limited to, (1) a requirement that each school bus contain a list of the names of any student with a life-threatening food allergy who regularly rides such school bus and that such list is updated annually,** (2) information and training regarding cardiopulmonary resuscitation, first aid and the emergency management and administration of epinephrine, (3) instructions for the notification of emergency personnel, (4) follow-up and reporting procedures after a student has experienced an allergic reaction, (5) the signs and symptoms of anaphylaxis, (6) prevention and risk-reduction strategies regarding allergic reactions, (7) instructions for carrying out the provisions of subdivision (1) of subsection (d) of section 10-212a of the general statutes, as amended by this act, and (8) any other relevant issues and topics related to emergency first aid to students who experience allergic reactions. The Department of Education shall make such protocol available to local and regional boards of education and post such protocol on the department's Internet web site. For purposes of this section, "school bus personnel" means any person who is a volunteer for, employed by or under contract with a local or regional board of education to drive a school bus, as defined in section 14-1 of the general statutes, or serves as a school bus monitor.

Sec. 4. (NEW) (*Effective July 1, 2018*) A local or regional board of education may include, in whole or in part, the model school bus safety protocol, as described in section 3 of this act, in any contract for the provision of school transportation services entered into or amended on or after October 1, 2019, by such local or regional board of education.

Sec. 5. Subdivisions (1) and (2) of subsection (a) of section 10-212a of the general statutes are repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):

(a) (1) A school nurse or, in the absence of such nurse, any other nurse licensed pursuant to the provisions of chapter 378, including a nurse employed by, or providing services under the direction of a local or regional board of education at, a school-based health clinic, who shall administer medical preparations only to students enrolled in such school-based health clinic in the absence of a school nurse, the principal, any teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, [or] coach of intramural and interscholastic athletics of a school [or school bus personnel, as defined in section 3 of this act](#), may administer, subject to the provisions of subdivision (2) of this subsection, medicinal preparations, including such controlled drugs as the Commissioner of Consumer Protection may, by regulation, designate, to any student at such school pursuant to the written order of a physician licensed to practice medicine, or a dentist licensed to practice dental medicine in this or another state, or an optometrist licensed to practice optometry in this state under chapter 380, or an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a, or a physician assistant licensed to prescribe in accordance with section 20-12d, and the written authorization of a parent or guardian of such child. The administration of medicinal preparations by a nurse licensed pursuant to the provisions of chapter 378, a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, [or] coach [or school bus personnel](#) shall be under the general supervision of a school nurse. No such school nurse or other nurse, principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach, [or] school paraprofessional [or school bus personnel](#) administering medication pursuant to this section shall be liable to such student or a parent or guardian of such student for civil damages for any personal injuries that result from acts or omissions of such school nurse or other nurse, principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach, [or] school paraprofessional [or school bus personnel](#) administering medication pursuant to this section in administering such preparations that may constitute ordinary negligence. This immunity does not apply to acts or omissions constituting gross, willful or wanton negligence.

(2) Each local and regional board of education that allows a school nurse or, in the absence of such nurse, any other nurse licensed pursuant to the provisions of chapter 378, including a nurse employed by, or providing services under the direction of a local or regional board of education at, a school-based health clinic, who shall administer medical preparations only to students enrolled in such school-based health clinic in the absence of a school nurse, the principal, any teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach of intramural and interscholastic athletics, [or] school paraprofessional of a school [or school bus personnel, as defined in section 3 of this act](#), to administer medicine or that allows a student to self-administer medicine, including medicine administered through the use of an asthmatic inhaler or an automatic prefilled cartridge injector or similar automatic injectable equipment, shall adopt written policies and procedures, in accordance with this section and the regulations adopted pursuant to subsection (c) of this section, that shall be approved by the school medical advisor, if any, or other qualified licensed physician. Once so approved, such administration of medication shall be in accordance with such policies and procedures.

Sec. 6. Subdivision (1) of subsection (d) of section 10-212a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):

(d) (1) (A) With the written authorization of a student's parent or guardian, and (B) pursuant to the written order of a qualified medical professional, a school nurse and a school medical advisor, if any, may jointly approve and provide general supervision to an identified school paraprofessional [or an identified school bus personnel, as defined in section 3 of this act.](#) to administer medication, including, but not limited to, medication administered with a cartridge injector, to a specific student with a medically diagnosed allergic condition that may require prompt treatment in order to protect the student against serious harm or death.